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CONFIRMATION NO. 5096

<b>SERIAL NUMBER</b> 10/509,166	<b>FILING OR 371(c) DATE</b> 09/27/2004 <b>RULE</b>	<b>CLASS</b> 250	<b>GROUP ART UNIT</b> 2878	<b>ATTORNEY DOCKET NO.</b> WATE-0013
<b>APPLICANTS</b> Robert Appleyard, Hillarys, W.A., AUSTRALIA; <i>yes DS</i>				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/AU03/00372 03/27/2003 <i>yes DS</i>				
<b>** FOREIGN APPLICATIONS *****</b> AUSTRALIA PS 1409 03/27/2002 <i>yes DS</i>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature <i>[Initials]</i> Initials		<b>STATE OR COUNTRY</b> AUSTRALIA	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 57
<b>INDEPENDENT CLAIMS</b> 4				
<b>ADDRESS</b> 23377				
<b>TITLE</b> Multiple laser safety system				
<b>FILING FEE RECEIVED</b> 3790	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	